



**Examiner Andujar,
Leonardo**

**Honorable Assistant Commissioner
for Patents
Washington, D.C. 20231**

Sir:

Submitted herewith are corrected drawing replacement sheets that include Figures 21 and 23 through 26. Specifically, in Figure 21 of the drawings the letter “m” and the corresponding lead line have been added. In Figures 23 and 24 of the Drawings, the legend “Conventional Art” has been added. Also, in Figures 25 and 26 of the drawings the legend “Related Art” has been added.

Kindly direct any inquiries in connection with this matter to the undersigned at the below-listed address and telephone number.

Respectfully submitted,

Stanley P. Fisher
Registration Number 24,344

Juan Carlos A. Marquez
Registration Number 34,072

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3110 Fairview Park Drive
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December 12, 2005

SPF/JCM/JB



IFPA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

SATOU et al.

Application Number: 10/823,734

Filed: April 14, 2004

For: A SEMICONDUCTOR DEVICE

ATTORNEY DOCKET NO. HITA.0542

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Art Unit 2826

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COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	16	16	(Over 20)	x \$50	0
Independent Claims	1	1	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x] Response to Office Action
(with Claim Amendments)
[] Substitute Specification
[] Preliminary Amendment
[] Other _____

[x] Petition for Extension of Time for 1 month
[] Terminal Disclaimer
[] Letter to Draftsperson
[] Assignment
[] Petition under _____

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] A check in the amount of **\$120.00** to cover the one-month extension fee are enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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